PTO/SB/22 (07-06)

Approved for use through 09/30/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	D 27 CED 4 426(a)	Docket Number (Opti-	onal)				
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/070,882		41577-270459					
				For Recombinant Microorganisms			
				Art Unit 1645		Examiner S. Devi	i
This is a request under the provisions of 37 CFR 1.136(a) is application. The requested extension and fee are as follows (check time)							
	Fee	Small Entity Fee					
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$				
☐ Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$				
Three months (37 CFR 1.17(a)(3))) \$1050	\$525	\$ <u>1050</u>				
Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$				
Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$				
Payment by credit card.							
☐ The Director has already been authorized to ch	y fees which may be r osed a duplicate copy public. Credit card inf	equired, or credit any c of this sheet.	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge an Deposit Account Number <u>11-0855</u> . I have end WARNING: Information on this form may become this form. Provide credit card information and aut	y fees which may be r osed a duplicate copy public. Credit card inf	equired, or credit any c of this sheet.	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge any Deposit Account Number 11-0855. I have encl WARNING: Information on this form may become this form. Provide credit card information and aut	y fees which may be r osed a duplicate copy public. Credit card inf thorization on PTO-203	equired, or credit any c y of this sheet. ormation should not be 8.	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge any Deposit Account Number 11-0855. I have end WARNING: Information on this form may become this form. Provide credit card information and aut I am the applicant/inventor assignee of record of the entir	y fees which may be r osed a duplicate copy public. Credit card inf thorization on PTO-203	equired, or credit any c y of this sheet. ormation should not be 8.	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge an Deposit Account Number 11-0855. I have encl WARNING: Information on this form may become this form. Provide credit card information and aut I am the □ applicant/inventor.	y fees which may be r osed a duplicate copy public. Credit card inf thorization on PTO-203 re interest. See 37 CI 8.73(b) is enclosed. (f	equired, or credit any or of this sheet. ormation should not be 8. FR 3.71 Form PTO/SB/96).	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge any Deposit Account Number <u>11-0855</u> . I have end WARNING: Information on this form may become this form. Provide credit card information and aut I am the	y fees which may be roosed a duplicate copy public. Credit card inf thorization on PTO-203 re interest. See 37 Cl 1.73(b) is enclosed. (if kegistration Number 3	equired, or credit any or of this sheet. ormation should not be 8. FR 3.71 Form PTO/SB/96).	overpayment, to				
The Director has already been authorized to charge any Deposit Account Number 11-0855. I have encl WARNING: Information on this form may become this form. Provide credit card information and aut	y fees which may be roosed a duplicate copy public. Credit card infinerization on PTO-203 re interest. See 37 Cl 1.73(b) is enclosed. (I tegistration Number 3 FR 1.34.	equired, or credit any or of this sheet. ormation should not be 8. FR 3.71 Form PTO/SB/96).	overpayment, to				
The Director has already been authorized to charge any Deposit Account Number 11-0855. I have encl WARNING: Information on this form may become this form. Provide credit card information and aut	y fees which may be roosed a duplicate copy public. Credit card infinerization on PTO-203 re interest. See 37 Cl 1.73(b) is enclosed. (I tegistration Number 3 FR 1.34.	equired, or credit any or of this sheet. ormation should not be 8. FR 3.71 Form PTO/SB/96).	overpayment, to				
The Director has already been authorized to ch The Director is hereby authorized to charge any Deposit Account Number 11-0855. I have end WARNING: Information on this form may become this form. Provide credit card information and aut I am the	y fees which may be roosed a duplicate copy public. Credit card infinerization on PTO-203 re interest. See 37 Cl 1.73(b) is enclosed. (I tegistration Number 3 FR 1.34.	equired, or credit any c y of this sheet. ormation should not be 8. =R 3.71 Form PTO/SB/96). 2.467	overpayment, to				
The Director has already been authorized to charge any Deposit Account Number 11-0855. I have encl WARNING: Information on this form may become this form. Provide credit card information and authorized to a signed of record of the entire Statement under 37 CFR 3 ■ attorney or agent of record. Find attorney or agent under 37 CFR 3 ■ attorney or agent under 37 CFR 3	y fees which may be roosed a duplicate copy public. Credit card infinerization on PTO-203 re interest. See 37 Cl 1.73(b) is enclosed. (I tegistration Number 3 FR 1.34.	equired, or credit any of of this sheet. ormation should not be 8. FR 3.71 Form PTO/SB/96). 2,467 October 29, 2	overpayment, to included on				

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USFT Ob process) an application. Confidentialisty is governed by \$3 U.S. C. 12 and 37 CFR 1.13 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFT O. Time will vary depending upon the indebudul case. Any comments on the amount of their you required to complete this form and/or their process of the complete the first market of the complete of the complete of the complete the first market of the complete of the c

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.